ID#
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## REQUEST TO $\underline{\mathbf{DOWNGRADE}}$ LICENSE

I,	, of	
(Name of owner, o	officer, member, or partner)	(Company Name as it appears on the license)
hereby formally req	uest to <b>downgrade</b> my license (Co	from a license to:  ommercial, Residential or UNLIMITED Home Improvement)
Only check one:		
Residential	<b>Builder</b> ( <b>ONLY</b> if you had Bu	ilding or Light Building)
Unlimited -	Home Improvement (w/ curren	nt specialties)
Limited - H	ome Improvement (w/ current	specialties)
<u>Limited</u> – (Projection are <u>NOT</u> required.	ects <u>less than</u> \$20,000.00) - A l	palance sheet and proof of workers compensation coverage
Unlimited or leaverage are required		A balance sheet and proof of workers compensation
cannot do work out	side the classifications listed or	Residential / Home Improvement projects only and I my license. In addition, my license does not authorize me 00 or more (including material and labor).
By:Signature o	f Owner, Officer, Member, Par	Date:
Phone:		
Fax:		
Email:		
	ichelle Spoor @ 501-371-15 e faxed to 501-372-2247.	06 with any questions regarding this form.
OFFICE USE ON	LY	
Date:		
MC:	Other:	

Revised 10/2011